

DECLARATION FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND SYSTEM FOR POSITIONING PATIENTS

FOR MEDICAL TREATMENT PROCEDURES

the specification of which

(Check one) is attached hereto.
 was filed on _____ as
 Application Serial No. _____
 and amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)			Priority Claimed	
N/A (Number)	(Country)	(Day/Month/Year Filed)	Yes	No.
_____	_____	_____	Yes	No.
_____	_____	_____	Yes	No.

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

N/A (Application Serial No.)	(Filing Date)
_____	_____

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of the application:

<u>N/A</u> (Application Serial No.)	<u>(Filing Date)</u>	<u>(Status-patented, pending, abandoned)</u>
<u>(Application Serial No.)</u>	<u>(Filing Date)</u>	<u>(Status-patented, pending, abandoned)</u>

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office contacted therewith:

Edward H. Berkowitz #27,771; Bella Fishman #37,485; Hunter Auyang #33,224; Bradford Friedman #41,764

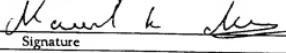
Address all telephone calls to Hunter L. Auyang at telephone no. (650) 424-6391

Address all correspondence to:

VARIAN ASSOCIATES, INC.
Legal Department
3100 Hansen Way, M/S E-339
Palo Alto, California 94304

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Sole or First Inventor: <u>Majid L. Riaziat</u>	Signature	Date
Inventors Signature: 		<u>10/23/98</u>
Residence: <u>1210 Woodflower Way, San Jose, California 95117</u>		Date
Citizenship: <u>United States</u>		

Full Name of Second or Joint Inventor: <u>Marcel Marc</u>	Signature	Date
Inventors Signature: 		<u>10/27/98</u>
Residence: <u>5038 Bel Estos Drive, San Jose, CA 95124</u>		Date
Citizenship: <u>United States</u>		

** CONTINUED ON NEXT PAGE **

Full Name of Third or Joint Inventor: <u>Stanley Mansfield</u>	Inventors Signature: <u>Stanley Mansfield</u>	Date <u>10/23/98</u>
Residence: 1137 S. Bernardo Avenue, Sunnyvale, CA 94087	Signature	
Citizenship: United States		

Full Name of Fourth or Joint Inventor: <u>Hassan Mostafavi</u>	Inventors Signature: <u>Hassan Mostafavi</u>	Date <u>10/23/98</u>
Residence: 1281 Via Huerta, Los Altos, CA 94024	Signature	
Citizenship: United States		

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POWER OF ATTORNEY
By Assignee

Varian Medical Systems, Inc., assignee(s) of the application for United States Letters Patent for an improvement in

METHOD AND SYSTEM FOR POSITIONING PATIENTS FOR MEDICAL TREATMENT PROCEDURES
by Majid L. Riaziat et al.

the specification of which:

is filed herewith, OR
 was filed on 10/23/98, having U.S. Patent Application Serial No. 09/178,385,

does hereby appoint as my attorneys and/or agents, with full power of substitution and revocation, to prosecute this application and transact all business in the United States Patent and Trademark Office, and in countries other than the United States, and to do all things necessary or appropriate therefor before any competent International Authorities in connection with any international patent application(s) corresponding to the above-identified application, all of the registered practitioners identified by Customer Number 22249:



22249
PATENT
TRADEMARK
OFFICE

LYON & LYON LLP
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Los Angeles, CA 90071
(408) 993-1555

Please send all correspondence to the attention of Peter C. Mei, at the above Customer Number, and direct all telephone calls to (408) 993-1555 Ext. 2001.

I, the undersigned, declare that I have reviewed copies of the documentary evidence establishing chain of title to the patent application identified above from the inventor(s) to the assignee(s), which:

is filed for recordation herewith; or
 was recorded at Reel 9625, Frame 0968; and
 has been sent for recordation under separate cover, copy attached herewith.
 a copy of the Change of Name from Varian Associates, Inc. to
Varian Medical Systems, Inc. which is attached for recordation herewith

To the best of the undersigned's knowledge and belief, title is in the assignee(s) identified above. Furthermore, the undersigned is empowered to sign this document on behalf of the assignee(s).

Full Name of Assignee:	Varian Medical Systems, Inc.
Post Office Address:	3100 Hansen Way, Palo Alto, CA 94304-1038
Signature of Declarant or Assignee:	Date:
	7/20/00
Full Name of Declarant	
If Other Than Assignee:	Joseph B. Phair
Title of Declarant:	Vice President and General Counsel
Address of Declarant:	3100 Hansen Way, Palo Alto, CA 94304